

<div style="float: left; width: 10%; font-size: 1.2em;">182</div> <div style="float: right; text-align: center;"> <b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b>            (FOR USE WITH FORM PTO-875)         </div>							SERIAL NO. <b>09/559 223</b>		FILING DATE <b>4-26-00</b>	
APPLICANT(S)										
<b>CLAIMS</b>										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.				
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98										
99										
100										
TOTAL IND.	31									
TOTAL DEP.	129									
TOTAL CLAIMS	160									

<div style="float: left; width: 10%;">292</div> <div style="float: right; text-align: center;"> <b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b>            (FOR USE WITH FORM PTO-875)         </div>							SERIAL NO. 69/559-223		FILING DATE 04-26-00	
							APPLICANT(S)			
<b>CLAIMS</b>										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.				
101		3					51			
102	1						52			
103	1						53			
104		1					54			
105		1					55			
106		1					56			
107		1					57			
108		1					58			
109		1					59			
110		1					60			
111		1					61			
112		1					62			
113		1					63			
114		1					64			
115		1					65			
116		1					66			
117		1					67			
118		1					68			
119		1					69			
120		3					70			
121	1						71			
122		1					72			
123		1					73			
124	1						74			
125		1					75			
126		1					76			
127		1					77			
128		1					78			
129		1					79			
130		1					80			
131	1						81			
132	1						82			
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139	1						89			
140	1						90			
141	1						91			
142	1						92			
143	1						93			
144	1						94			
145	1						95			
146	1						96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	20						TOTAL IND.			
TOTAL DEP.	30						TOTAL DEP.			
TOTAL CLAIMS	50						TOTAL CLAIMS			